Substitute for form 1449/PTO (Revised 07/2007) INFORMATION DISCLOSURE STATEMENT BY APPLICANT						Complete if Known Application Number 10/567,508							
						ling Date	41110	/1	February 7, 2006				
						rst Named Ir	went	or	Reynolds et al.				
						Art Unit			3731				
						Examiner Name			Thaler, Michael H.				
(Use as many sheets as necessary) Sheet 1 of 1						Attorney Docket Number			047956/306612				
Sneet		1		01 1	IAU	Attorney Docket Number			0477307300012				
				Ų	J. S. F	PATENT DO	OCU	MENT	S				
Examiner Initials*	* No.		_			Publication Date MM-DD-YYYY		Name of Patentee or Applicant of Cited Document		t Relevant	Pages, Columns, Lines, Where Relevant Passages of Relevant Figures Appear		
			US-2	2002/0198593 A1	12-	26-2002		Gomez e tal.					
	<u> </u>			FOF	REIG	N PATENT	DO	CUME	NTS				
Examiner Initials	Cite No.	o. Cou		Foreign Patent Document untry Code - Number Kind Code unown)		Publication Date MM-DD-YYYY		Name of Patentee or Applicant of Cited Document		Where Rele Passages or Re	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear Transl Attac		
	2		EP	1 036 550 A2		09-20-2000		amg Handelsgesellschaft					
								,					
	I				TO	HER DOC	UMI	ENTS					
Examiner Initials*		Cite No. Include name of the author (in the item (book, magazine, jour number(s), publisher, city and			urnal,	CAPITAL LETTERS), title of the article (when appropriate), title of mal, serial, symposium, catalog, etc.), date, page(s), volume-issue /or country where published.						English Language Translation Attached	
								.,,					
Examiner Signature				134 300 300 300 300 300 300 300 300 300 3					Date Considered				

^{*}Examiner: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.